

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

ResCare, Inc. Advocacy Fund

ADDRESS (number and street)

9901 Linn Station Road

☐Check if different
than previously
reported. (ACC)

Louisville

KY

40223

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00344663

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☒

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2011

through

07

31

2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kev Lovan

Signature of Treasurer

Electronically Filed by Kev Lovan

Date

08

19

2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ResCare, Inc. Advocacy Fund

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2011	59874.69
(b) Cash on Hand at Beginning of Reporting Period	71748.56	
(c) Total Receipts (from Line 19)	5344.20	35140.57
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77092.76	95015.26
7. Total Disbursements (from Line 31)	2240.00	20162.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	74852.76	74852.76
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ResCare, Inc. Advocacy Fund

Report Covering the Period:

From:

M M
0 7D D
0 1Y Y Y Y
2 0 1 1

To:

M M
0 7D D
3 1Y Y Y Y
2 0 1 1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2640.18	11593.68
(ii) Unitemized	2704.02	23546.89
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5344.20	35140.57
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5344.20	35140.57
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5344.20	35140.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5344.20	35140.57

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	52.50	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	52.50	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	600.00	10400.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	1640.00	9710.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2240.00	20162.50	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2240.00	20162.50	

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5344.20	35140.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5344.20	35140.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	52.50
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	52.50

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
DAVID S WASKEY

Mailing Address 2327 Saratoga Dr

City State Zip Code
Louisville KY 40205-2020

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Chief Legal and Compliance Off

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2011

Transaction ID: PR60462685064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
BARBARA WINTERS

Mailing Address 2115 River Rd

City State Zip Code
Marion IN 46952-1445

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.38

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2011

Transaction ID: PR60462705064

Amount of Each Receipt this Period

51.34

P/R Deduction (\$25.67 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
MICHAEL J REIBEL

Mailing Address 2953 Conners Station
Road

City State Zip Code
Simpsonville KY 40067-7628

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Chief Business Svcs Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2011

Transaction ID: PR60462715064

Amount of Each Receipt this Period

39.00

P/R Deduction (\$19.50 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

130.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

PETER J BROWN

Mailing Address 4074 Massie Ave

City

Louisville

State

KY

Zip Code

40207-2138

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Director Accounts Receivable

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462725064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

RALPH G GRONEFELD

Mailing Address 4106 Willow Reed Place

City

Louisville

State

KY

Zip Code

40299-5087

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

CEO/President/CSG President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2915.56

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462805064

Amount of Each Receipt this Period

416.46

P/R Deduction (\$208.23 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

PATRICK G KELLEY

Mailing Address 103 Oak Hill Ct

City

Mt Washington

State

KY

Zip Code

40047-5210

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

CSG President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1516.62

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462845064

Amount of Each Receipt this Period

216.66

P/R Deduction (\$108.33 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

673.12

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
MIKE ROSE

Mailing Address 3018 Autumn Hill Trail

City State Zip Code
New Albany IN 47150-9463

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Executive VP Administration

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462875064

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
GEORGE WATTS

Mailing Address 151 Catlett Rd

City State Zip Code
Hodgenville KY 42748-9636

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Chief Information Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.64

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462915064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
RAYMOND DAN BRICE

Mailing Address 9012 Spruce Tree Place

City State Zip Code
Louisville KY 40242-7643

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
VP/CFO Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462935064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

KEN LOVAN

Mailing Address 700 Fairway St

City

Bowling Green

State

KY

Zip Code

42103-2504

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

SR VP Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1160.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60462975064

Amount of Each Receipt this Period

170.00

P/R Deduction (\$85.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

MICHAEL CUTCHSHAW

Mailing Address 15562 Sunburst Ln

City

Huntington Beach

State

CA

Zip Code

92647-2943

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60463075064

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MEGAN M NEAL

Mailing Address 4558 E. Michigan Ave

City

Phoenix

State

AZ

Zip Code

85032-1587

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Senior Executive Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60463185064

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

238.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
ELIZABETH COLEY

Mailing Address 290 Lewis Rd

City State Zip Code
Springfield PA 19064-2138

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Program Development, Vice Pres

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60463285064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
ROBERT KNIGHT

Mailing Address 605 Hillsboro Dr

City State Zip Code
Silver Spring MD 20902-3132

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Workforce Development, Managin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.36

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60463515064

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
KAREN RAMAGE

Mailing Address 504 Bayview Dr

City State Zip Code
Hermosa Beach CA 90254-4516

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.38

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60463835064

Amount of Each Receipt this Period

43.34

P/R Deduction (\$21.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

133.34

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

MATTHEW J OTTIGER

Mailing Address 280 E. Columbus St

City

Columbus

State

OH

Zip Code

43206-2264

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Dir Gov't Affairs

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	1

Transaction ID: PR60463895064

Amount of Each Receipt this Period

84.00

P/R Deduction (\$42.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JANETTE A DYER

Mailing Address 309 Lydia Ln

City

Corona

State

CA

Zip Code

92882-8529

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

303.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	1

Transaction ID: PR60464295064

Amount of Each Receipt this Period

43.34

P/R Deduction (\$21.67 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

NANCY THOMPSON

Mailing Address 1885 S. Lake Reedy Blvd

City

Frostproof

State

FL

Zip Code

33843-9230

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional VP

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

303.38

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	1	1

Transaction ID: PR60464665064

Amount of Each Receipt this Period

43.34

P/R Deduction (\$21.67 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

170.68

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
RICHARD L TINSLEY

Mailing Address 2108 Highland Springs Place

City State Zip Code
Louisville KY 40245-5308

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Chief Development Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60464785064

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
DIANE RATH

Mailing Address 419 Wiltshire Ave

City State Zip Code
San Antonio TX 78209-5413

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

787.53

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60465305064

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
RONNIE L CORNELISON

Mailing Address 14798 N. 100th Way

City State Zip Code
Scottsdale AZ 85260-9097

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.12

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60465515064

Amount of Each Receipt this Period

41.16

P/R Deduction (\$20.58 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

221.16

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
MARSHA H IERONIMO

Mailing Address 459 Camden Park Dr

City State Zip Code
Covington LA 70435-0295

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.50

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2011

Transaction ID: PR60465575064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
DAVID RHODES

Mailing Address 1632 Linden St

City State Zip Code
Longmont CO 80501-2450

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.82

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2011

Transaction ID: PR60465945064

Amount of Each Receipt this Period

42.26

P/R Deduction (\$21.13 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
TAMARA L BARTA

Mailing Address 2700 N. 8th St

City State Zip Code
Independence KS 67301-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Senior Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2011

Transaction ID: PR60466145064

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

162.26

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

GALE BOHLING

Mailing Address 707 W. Sweetwater Ave

City

Phoenix

State

AZ

Zip Code

85029-1862

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Dir Gov't Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466195064

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

LARRY E WEISHAAR

Mailing Address 4605 Cherry Forest
Circle

City

Louisville

State

KY

Zip Code

40245-2127

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

VP, Support Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.40

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466215064

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

DAVID W MILES

Mailing Address 620 Woodlake Dr

City

Louisville

State

KY

Zip Code

40245-5121

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Exec VP Finance/Admin CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

758.38

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466235064

Amount of Each Receipt this Period

108.34

P/R Deduction (\$54.17 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

196.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
STEPHEN P BRUNET

Mailing Address 420 Trinity Hills Ln

City State Zip Code
Louisville KY 40207-2133

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Senior Regional VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

758.38

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466365064

Amount of Each Receipt this Period

108.34

P/R Deduction (\$54.17 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
RICHARD L MYERS

Mailing Address 1321 Jefferson Ct

City State Zip Code
Edmond OK 73034-4929

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
VP Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466695064

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
NEL TAYLOR

Mailing Address 11900 East Arbor Dr

City State Zip Code
Louisville KY 40223-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Chief Communication Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.28

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466865064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

248.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

PATIJ KELLY

Mailing Address 74 Westward Ln

City

Blue Ridge

State

GA

Zip Code

30513-4293

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Executive Director II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.36

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466935064

Amount of Each Receipt this Period

38.48

P/R Deduction (\$19.24 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ELLEN GOLDBERG

Mailing Address 430 Scotts Way

City

Augusta

State

GA

Zip Code

30909-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.96

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60466965064

Amount of Each Receipt this Period

42.28

P/R Deduction (\$21.14 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JANE L STEUR

Mailing Address 241 Onion Creek Ln

City

Driftwood

State

TX

Zip Code

78619-4417

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60467315064

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

110.76

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

JEFFREY S ENGELKE

Mailing Address 2928 Cedar Crest Cir

City

Round Rock

State

TX

Zip Code

78665-6272

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

VP of Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60467385064

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ALLISON GUESS BRITO

Mailing Address 7227 N. Vandiver

City

San Antonio

State

TX

Zip Code

78209-3037

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60467425064

Amount of Each Receipt this Period

32.50

P/R Deduction (\$16.25 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

STEPHEN R HENDRICKS

Mailing Address 7506 Meadow Stream Ct

City

Crestwood

State

KY

Zip Code

40014-7547

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.25

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 1 1

Transaction ID: PR60467495064

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

102.50

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)
RUTH M ROBERTSON

Mailing Address 65 Bowen Dr

City State Zip Code
Belmont NC 28012-9528

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
Regional Hr Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.38

Date of Receipt

M M / D D / Y Y Y Y
07 31 2011

Transaction ID: PR60467535064

Amount of Each Receipt this Period

43.34

P/R Deduction (\$21.67 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
JERRY L DAILEY

Mailing Address 7721 St Johns Rd

City State Zip Code
Floyds Knobs IN 47119-8517

FEC ID number of contributing
federal political committee.

C

Name of Employer
ResCare Inc.

Occupation
VP of Accounts Receivables

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.03

Date of Receipt

M M / D D / Y Y Y Y
07 31 2011

Transaction ID: PR60467975064

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

93.34

TOTAL This Period (last page this line number only)

2640.18

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

Ohio Provider Resource Association PAC

Mailing Address 1152 Goodale Boulevard

City
Columbus

State
OH

Zip Code
43212

Purpose of Disbursement
Contribution

011

Category/
Type

Candidate Name
Ohio Provider Resource Association PAC

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 10117971

Date of Disbursement

07 / 07 / 2011

Amount of Each Disbursement this Period

600.00

Contribution

SUBTOTAL of Disbursements This Page (optional)

600.00

TOTAL This Period (last page this line number only)

600.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 21

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
ResCare, Inc. Advocacy Fund

A. Full Name (Last, First, Middle Initial) Kentucky House Democratic Caucus Campaign Committee	Transaction ID: 10161774 Date of Disbursement
Mailing Address PO Box 4204	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 1</div> </div>
City Frankfort State KY Zip Code 40604	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name	<div> <div>2000.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Contribution
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Friends of MR/DD Citizens Committee	Transaction ID: 10161775 Date of Disbursement
Mailing Address 38252 Chettenham Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 1 / 2 0 1 1</div> </div>
City Willoughby State OH Zip Code 44094	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution Candidate Name	<div> <div>640.00</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Contribution
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Committee to Elect Renee Unterman	Transaction ID: 10171376 Date of Disbursement
Mailing Address PO Box 508	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 1 1</div> </div>
City Buford State GA Zip Code 30518	Amount of Each Disbursement this Period
Purpose of Disbursement Void - Check dated 09/10/2010 Candidate Name GA Sen. Renee S. Unterman	<div> <div>-500.00</div> </div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District:	Void - Check dated 09/10/-2010
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

2140.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 21 / 21

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ResCare, Inc. Advocacy Fund

A.

Full Name (Last, First, Middle Initial)

Committee to Re-elect Balfour

Mailing Address 2312 Waterscape Trail

City
Snellville

State
GA

Zip Code
30078

Purpose of Disbursement
Void - Check dated 10/13/2010

Candidate Name
GA Sen. Donald Kenneth Balfour

Office Sought: ☐ House
☒ Senate
☐ President

State: GA

District:

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Transaction ID: 10171379

Date of Disbursement

/ /

Amount of Each Disbursement this Period

-500.00

Category/
Type

Void - Check dated 10/13/-
2010

SUBTOTAL of Disbursements This Page (optional)

-500.00

TOTAL This Period (last page this line number only)

1640.00